

**State of Hawaii  
Department of Health  
Communicable Disease Division  
STD/AIDS Prevention Branch**

**Request for Proposals for**

**HIV Care Services:  
HIV/AIDS Case Management and  
Support Services in Maui County**

**RFP Number: HTH-121-1b**

**October 12, 2004**

October 12, 2004

REQUEST FOR PROPOSALS

HIV/AIDS CASE MANAGEMENT AND SUPPORT SERVICES  
IN THE COUNTY OF MAUI

RFP No. HTH-121-1b

**The Hawaii Department of Health, Communicable Disease Division, STD/AIDS Prevention Branch, is requesting proposals from qualified applicants to provide HIV/AIDS case management and support services to individuals with HIV in Maui County. The contract term will be from July 1, 2005 through June 30, 2007.**

Proposals shall be mailed and postmarked by the United State Postal Service on or before January 14, 2005, or hand delivered no later than 4:30 p.m., Hawaii Standard Time (HST), on January 14, 2005, at the drop-off sites designated on the Proposal Mail-in and Delivery Information Sheet. Proposals postmarked or hand delivered after the submittal deadline shall be considered late and rejected. There are no exceptions to this requirement.

The STD/AIDS Prevention Branch shall conduct an orientation on November 16, 2005, at 9:30 a.m. HST, in Room 418, Diamond Head Health Center, 3627 Kilauea Avenue, Honolulu, Hawaii. All prospective applicants are encouraged to attend the orientation.

**The deadline for submission of written questions is 4:30 p.m. HST on December 3, 2004. All written questions will receive a written response from the State on or about December 10, 2004.**

**Inquiries regarding this RFP should be directed to the RFP contact person, Mr. Ray Higa, at the STD/AIDS Prevention Branch, 3627 Kilauea Avenue, Rm. 306, Honolulu, Hawaii 96816, telephone: (808) 733-9010, fax: (808) 733-9015.**

# PROPOSAL MAIL-IN AND DELIVERY INFORMATION SHEET

ONE ORIGINAL AND ONE COPY OF THE PROPOSAL ARE REQUIRED. ADDITIONAL COPIES  
MAY BE SPECIFIED BY INDIVIDUAL DOH PROGRAMS.

ALL MAIL-INS MUST BE POSTMARKED BY THE USPS BEFORE 12:00 MIDNIGHT,  
January 14, 2005

All Mail-ins

**Department of Health  
Administrative Services Office  
P.O. Box 3378  
Honolulu, HI 96801-3378**

DOH RFP Coordinator

**Valerie K. Ako  
For further info or inquiries  
Phone: (808) 586-4556  
Fax: (808) 586-4649**

ALL HAND DELIVERIES WILL BE ACCEPTED AT THE FOLLOWING SITES UNTIL 4:30 P.M.,  
January 14, 2005

Drop-off Sites

**For applicants located on Oahu:**

**Department of Health  
Administrative Services Office  
Room 310, Kinau Hale  
1250 Punchbowl Street  
Honolulu, HI 96313**

**For applicants located in East Hawaii:**

**Department of Health  
Hawaii District Health Office  
State Office Building, Room 105  
75 Aupuni Street  
Hilo, Hawaii**

**For applicants located in West Hawaii:**

**Department of Health  
Hawaii District Health Office at Kona  
Kealahou Business Plaza, Room 103  
81-980 Halekii Street  
Kealahou, Hawaii  
Attn: DOH Administrative Services  
Office Attn: DOH Administrative  
Services Office**

**For applicants located on Kauai:**

**Department of Health  
Kauai District Health Office  
Lihue Health Center  
3040 Umi Street  
Lihue, Kauai  
Attn: DOH Administrative Services Office**

**For applicants located on Maui:**

**Department of Health  
Maui District Health Office  
State Office Building, 3<sup>rd</sup> Floor  
54 High Street  
Wailuku, Maui  
Attn: DOH Administrative Services  
Office**

BE ADVISED: All mail-ins postmarked USPS after 12:00 midnight, January 14, 2005, will not be  
accepted for review and will be returned.

Hand deliveries will not be accepted after 4:30 p.m., January 14, 2005.

Deliveries by private mail services, such as FedEx or UPS, shall be considered hand  
deliveries, and will not be accepted if received after  
4:30 p.m., January 14, 2005.

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# **Section 1**

## **Administrative Overview**

## **Section 1**

### **Administrative Overview**

Applicants are encouraged to read each section of the Request for Proposals (RFP) thoroughly. While sections such as the administrative overview may appear similar among RFPs, state purchasing agencies may add additional information as applicable. It is the responsibility of the applicant to understand the requirements of *each* RFP.

#### **I. Authority**

This RFP is issued under the provisions of the Hawaii Revised Statutes, Chapter 103F and its administrative rules. All prospective applicants are charged with presumptive knowledge of all requirements of the cited authorities. Submission of a valid executed proposal by any prospective applicant shall constitute admission of such knowledge on the part of such prospective applicant.

#### **II. RFP Organization**

This RFP is organized into five sections:

***Section 1, Administrative Overview***--Provides applicants with an overview of the procurement process.

***Section 2, Service Specifications***--Provides applicants with a general description of the tasks to be performed, delineates applicant responsibilities, and defines deliverables (as applicable).

***Section 3, POS Proposal Application Instructions***--Describes the required format and content for the proposal application.

***Section 4, Proposal Evaluation***--Describes how proposals will be evaluated by the state purchasing agency.

***Section 5, Attachments*** --Provides applicants with information and forms necessary to complete the application.

### **III. Contracting Office**

The Contracting Office is responsible for overseeing the contract(s) resulting from this RFP, including system operations, fiscal agent operations, and monitoring and assessing provider performance. The Contracting Office is:

STD/AIDS Prevention Branch  
Department of Health  
State of Hawaii  
3627 Kilauea Avenue, Room 306  
Honolulu, Hawaii 96816  
Telephone: (808) 733-9010 Fax: (808) 733-9015

### **IV. Procurement Timetable**

<u>Activity</u>	<u>Scheduled Date</u>
Public notice announcing RFP	<u>October 12, 2004</u>
Distribution of RFP	<u>October 12, 2004</u>
RFP orientation session	<u>November 16, 2004</u>
Closing date for submission of written questions for written responses	<u>December 3, 2004</u>
State purchasing agency's response to applicants' written questions	<u>December 10, 2004</u>
Discussions with applicant prior to proposal submittal deadline	<u>NA</u>
Proposal submittal deadline	<u>January 14, 2005</u>
Discussions with applicant after proposal submittal deadline	<u>January-April 2005</u>
Final revised proposals (optional)	<u>January-April 2005</u>
Proposal evaluation period	<u>January-April 2005</u>
Provider selection	<u>March-April 2005</u>
Notice of statement of findings and decisions	<u>March-April 2005</u>
Contract start date	<u>July 1, 2005</u>

### **V. Orientation**

An orientation for applicants in reference to the request for proposals will be held as follows: November 16, 2004, at 9:30 a.m., in Room 418, Diamond Head Health Center, 3627 Kilauea Avenue, Honolulu, Hawaii. Special modifications (e.g. sign language interpreter, large print, taped materials, etc.) can be provided, if requested in advance by calling Mr. Ray Higa at (808) 733-9010.

Applicants are encouraged to submit written questions prior to the orientation. Impromptu questions will be permitted and spontaneous answers provided at the state purchasing agency's discretion. However, answers provided at the orientation are only intended as general direction and may not represent the state purchasing agency's position. Formal official responses will be provided in writing. To ensure a written response, any oral questions should be submitted in writing following the



close of the orientation, but no later than 4:30 p.m. H.S.T., on December 3, 2004, in order to generate written state purchasing agency response.

## **VI. Submission of Questions**

Applicants may submit questions in writing to the RFP Contact Person(s) identified in Section 2 of this RFP. The deadline for submission of written questions is December 3, 2004. All written questions will receive a written response from the state purchasing agency. State agency responses to applicant questions will be provided by December 10, 2004.

## **VII. Submission of Proposals**

**A. Forms/Formats** - Forms, with the exception of program specific requirements, may be found on the State Procurement Office website at: [www.spo.hawaii.gov](http://www.spo.hawaii.gov), click *Procurement of Health and Human Services and For Private Providers*. Refer to the Proposal Application Checklist for the location of program specific forms.

1. **Proposal Application Identification (Form SPO-H-200)** - Provides identification of the proposal.
2. **Proposal Application Checklist** – Provides applicants with information on where to obtain the required forms; information on program specific requirements; which forms are required and the order in which all components should be assembled and submitted to the state purchasing agency.
3. **Table of Contents** - A sample table of contents for proposals is located in Section 5, Attachments. This is a sample and meant as a guide. The table of contents may vary depending on the RFP.
4. **Proposal Application (Form SPO-H-200A)** - Applicant shall submit comprehensive narratives that addresses all of the issues contained in the Proposal Application Instructions, including a cost proposal/budget if required. (Refer to Section 3 of this RFP.)
5. **Registration Form (SPO-H-100A)** – If applicant is not registered with the State Procurement Office (business status), this form must be submitted with the application. If applicant is unsure as to their registration status, they may check the State Procurement Office website at: <http://www.spo.hawaii.gov>, click *Procurement of Health and Human Services*, and *For Private Providers and Provider Lists...The List of Registered Private Providers for Use with the*

*Competitive Method of Procurement* or call the State Procurement Office at (808) 587-4706.

6. **Tax Clearance** – A certified copy of a current valid tax clearance certificate issued by the State of Hawaii, Department of Taxation (DOTAX) and the Internal Revenue Service (IRS) will be required either at the time of proposal submittal or upon notice of award at the discretion of the purchasing agency.

Refer to Section 4, item III.A.1, Administrative Requirements, and the Proposal Application Checklist to see if the tax clearance is required at time of proposal submittal. The tax clearance application may be obtained from the Department of Taxation website at [www.hawaii.gov/tax/tax.html](http://www.hawaii.gov/tax/tax.html).

- B. Program Specific Requirements** - Additional program specific requirements are included in Sections 2 and/or 3, Service Specifications and the Proposal Application Instructions, as applicable. If Federal and/or State certifications are required, they are listed on the Proposal Application Checklist.
- C. Multiple or Alternate Proposals** - Multiple or alternate proposals shall not be accepted unless specifically provided for in Section 2 of this RFP. In the event alternate proposals are not accepted and an applicant submits alternate proposals, but clearly indicates a primary proposal, it shall be considered for award as though it were the only proposal submitted by the applicant.
- D. Proposal Submittal** - Proposals must be postmarked by USPS or hand delivered by the date and time designated on the Proposal Mail-In and Delivery Information Sheet attached to this RFP. Any proposal post-marked or received after the designated date and time shall be rejected. Note that postmarks must be by United States Postal Service or they will be considered hand-delivered and shall be rejected if late. The number of copies required is located on the Proposal Mail-In and Delivery Information Sheet.
- One original and four (4) copies** of the proposal are required. Proposals must be postmarked before 12:00 midnight, January 14, 2005, or delivered to the designated drop-off sites by 4:30 p.m., January 14, 2005. Any proposal postmarked or received after the designated date and time shall be rejected. Faxed proposals or proposals transmitted by e-mail are not acceptable.
- E. Wages and Labor Law Compliance** - Before a provider enters into a service contract in excess of \$25,000, the provider shall certify that it complies with section 103-55, HRS, Wages, hours, and working conditions of employees of contractors performing services. Section 103-55, HRS may be obtained from the Hawaii State Legislature website at <http://www.capitol.hawaii.gov/>. Or go directly to:

- F. Confidential Information** – If an applicant believes any portion of a proposal contains information that should be withheld as confidential, the applicant shall request in writing nondisclosure of designated proprietary data to be confidential and provide justification to support confidentiality. Such data shall accompany the proposal, be clearly marked, and shall be readily separable from the proposal to facilitate eventual public inspection of the non-confidential sections of the proposal.

**Note that price is not considered confidential and will not be withheld.**

## **VIII. Discussions with Applicants**

- A. Prior to Submittal Deadline** - Discussions may be conducted with potential applicants to promote understanding of the purchasing agency's requirements.
- B. After Proposal Submittal Deadline** - Discussions may be conducted with applicants whose proposals are determined to be reasonably susceptible of being selected for award, but proposals may be accepted without discussions, in accordance section 3-143-403, HAR.

## **IX. Opening of Proposals**

Upon receipt of proposal by a state purchasing agency at a designated location, proposals, modifications to proposals, and withdrawals of proposals shall be date-stamped, and when possible, time-stamped. All documents so received shall be held in a secure place by the state purchasing agency and not examined for evaluation purposes until the submittal deadline.

Procurement files shall be open to public inspection after a contract has been awarded and executed by all parties.

## **X. Additional Materials and Documentation**

Upon request from the state purchasing agency, each applicant shall submit any additional materials and documentation reasonably required by the state purchasing agency in its evaluation of the proposals.

## **XI. RFP Amendments**

The State reserves the right to amend this RFP at any time prior to the closing date for the final revised proposals.

## **XII. Final Revised Proposals**

The applicant's final revised proposal, *as applicable* to this RFP, must be postmarked or hand delivered by the date and time specified by the state purchasing agency. Any final revised proposal post-marked or received after the designated date and time will be rejected. If a final revised proposal is not submitted, the previous submittal shall be construed as their best and final offer/proposal. *The applicant shall submit-only the section(s) of the proposal that are amended, along with the Proposal Application Identification Form (SPO-H-200).* After final revised proposals are received, final evaluations will be conducted for an award.

## **XIII. Cancellation of Request for Proposal**

The request for proposal may be canceled and any or all proposals may be rejected in whole or in part, when it is determined to be in the best interests of the State.

## **XIV. Costs for Proposal Preparation**

Any costs incurred by applicants in preparing or submitting a proposal are the applicants' sole responsibility.

## **XV. Provider Participation in Planning**

Provider participation in a state purchasing agency's efforts to plan for or to purchase health and human services prior to the state purchasing agency's release of a request for proposals, including the sharing of information on community needs, best practices, and providers' resources, shall not disqualify providers from submitting proposals if conducted in accordance with sections 3-142-202, 3-142-203 and 3-143-618 of the Hawaii Administrative Rules for Chapter 103F, HRS.

## **XVI. Rejection of Proposals**

The State reserves the right to consider as acceptable only those proposals submitted in accordance with all requirements set forth in this RFP and which demonstrate an

understanding of the problems involved and comply with the service specifications. Any proposal offering any other set of terms and conditions contradictory to those included in this RFP may be rejected without further notice.

A proposal may be automatically rejected for any one or more of the following reasons: (Relevant sections of the Hawaii Administrative Rules for Chapter 103F, HRS, are parenthesized)

- (1) Rejection for failure to cooperate or deal in good faith. (Section 3-141-201, HAR)
- (2) Rejection for inadequate accounting system. (Section 3-141-202, HAR)
- (3) Late proposals (Section 3-143-603, HAR)
- (4) Inadequate response to request for proposals (Section 3-143-609, HAR)
- (5) Proposal not responsive (Section 3-143-610 (1), HAR)
- (6) Applicant not responsible (Section 3-143-610 (2), HAR)

## **XVII. Notice of Award**

A statement of findings and decision shall be provided to all applicants by mail upon completion of the evaluation of competitive purchase of service proposals.

Any agreement arising out of this solicitation is subject to the approval of the Department of the Attorney General as to form, and to all further approvals, including the approval of the Governor, required by statute, regulation, rule, order or other directive.

No work is to be undertaken by the awardee prior to the contract commencement date. The State of Hawaii is not liable for any costs incurred prior to the official starting date.

## **XVIII. Protests**

Any applicant may file a protest against the awarding of the contract. The Notice of Protest form, SPO-H-801, is available on the SPO website (see the Proposal Application Checklist in Section 5 of this RFP. Only the following matters may be protested:

- (1) A state purchasing agency's failure to follow procedures established by Chapter 103F of the Hawaii Revised Statutes;
- (2) A state purchasing agency's failure to follow any rule established by Chapter 103F of the Hawaii Revised Statutes; and
- (3) A state purchasing agency's failure to follow any procedure, requirement, or evaluation criterion in a request for proposals issued by the state purchasing agency.

The Notice of Protest shall be mailed by USPS or hand delivered to the head of the state purchasing agency conducting the protested procurement and the procurement officer who is conducting the procurement (as indicated below) within five working days of the postmark of the Notice of Findings and Decision sent to the protestor. Delivery services other than USPS shall be considered hand deliveries and considered submitted on the date of actual receipt by the state purchasing agency.

**Head of State Purchasing Agency**

Name: Chiyome Leinaala Fukino, M.D.

Title: Director of Health

Mailing Address: P.O. Box 3378, Honolulu, Hawaii 96801

Business Address: 1250 Punchbowl Street, Honolulu, Hawaii

**Procurement Officer**

Name: Ann Kinningham

Title: Chief, Administrative Services Office

Mailing Address: P.O. Box 3378, Honolulu, Hawaii 96801

Business Address: 1250 Punchbowl Street, Honolulu, Hawaii

**XIX. Availability of Funds**

The award of a contract and any allowed renewal or extension thereof, is subject to allotments to be made by the Director of Finance, State of Hawaii, pursuant to Chapter 37, Hawaii Revised Statutes, and subject to the availability of State and/or Federal funds.

**XX. Monitoring and Evaluation**

The criteria by which the performance of the contract will be monitored and evaluated are:

- (1) Performance/Outcome Measures
- (2) Output Measures
- (3) Quality of Care/Quality of Services
- (4) Financial Management
- (5) Administrative Requirements

## **XXI. General and Special Conditions of Contract**

The general conditions that will be imposed contractually are on the POS website. (See Section 5, Proposal Application Checklist for the address). Special conditions may also be imposed contractually by the state purchasing agency, as deemed necessary.

## **XXII. Cost Principles**

In order to promote uniform purchasing practices among state purchasing agencies procuring health and human services under Chapter 103F, HRS, state purchasing agencies will utilize standard cost principles outlined in Form SPO-H-201 which is available on the SPO Website (see Section 5, the Proposal Application Checklist). Nothing in this section shall be construed to create an exemption from any cost principle arising under federal law.

## **Section 2**

### **Service Specifications**



# **HIV/AIDS Case Management and Support Services in Maui County**

## **Section 2 Service Specifications**

### **I. Introduction**

#### **A. Overview, Purpose or Need**

The STD/AIDS Prevention Branch of the Hawaii State Department of Health seeks to procure case management and other support services for persons living with HIV/AIDS in Maui County, their families or other significant persons in their lives.

#### **B. Description of the goals of the service**

The goal of this procurement is to provide HIV case management services and support services as described below:

- 1) intake/initial assessment of clients' social and health service needs;
- 2) development of written service plan;
- 3) implementation of the service plan and, based on level of client acuity, provision of priority services i-iv below
  - i. medical case management
  - ii. specialized case management
  - iii. social service case management
  - iv. client support services
- 4) ongoing assessment of client needs, adjustment to service plan and acuity level.

#### **C. Description of the target population to be served**

Persons living with HIV/AIDS in Maui County, their families or other significant persons in their lives with particular focus on individuals at a high level of acuity.

#### **D. Geographic coverage of service**

Maui County.

#### **E. Probable funding amounts, source, and period of availability**

**Total Funding:** Two hundred fifty-five thousand five hundred nine dollars (\$255,509) each fiscal year (Pending legislative appropriations and the availability of funds.)

**Source of Funds:** State

**Availability:** 7/1/05-6/30/07

## II. General Requirements

- A. **Specific qualifications or requirements, including but not limited to licensure or accreditation**

NONE

- B. **Secondary purchaser participation**

After-the-fact secondary purchases will be allowed.

Planned secondary purchases

NONE

- C. **Multiple or alternate proposals**

☐ Allowed ☒ Unallowed

- D. **Single or multiple contracts to be awarded**

☒ Single ☐ Multiple ☐ Single & Multiple

- E. **Single or multi-term contracts to be awarded**

☐ Single term (< 2 yrs) ☒ Multi-term (> 2 yrs.)

**Initial term of contract: Two (2) years**

**Length of each extension: Twenty-four (24) months**

**Number of possible extensions: Two (2)**

**Maximum length of contract: Six (6) years**

**The initial period shall commence on the start date (July 1, 2005) or**

**Notice to Proceed, whichever is later.**

**Conditions for extension: 1) Availability of funds; 2) must be in writing; 3) must be executed prior to expiration.**

**F. RFP contact person**

**The individual listed below is the sole point of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should will be submitted to the RFP contact person and received on or before the day and time specified in Section I, Item IV (Procurement Timetable) of this RFP.**

**Ray Higa  
STD/AIDS Prevention Branch  
Hawaii State Department of Health  
3627 Kilauea Avenue, Rm. 306  
Honolulu, Hawaii 96816  
Phone: (808) 733-9010 (Non-TDD) Fax: (808) 733-9015**

**III. Scope of Work**

**The scope of work encompasses the following tasks and responsibilities:**

**A. Service Activities**

**NOTE:** *This HIV/AIDS case management RFP prioritizes services in manner supportive and complementary to the priorities of the Ryan White CARE Act. The staff, services and infrastructure provided under this State funding shall be considered sufficient to allow agencies to deliver CARE Act funded services. The Department of Health, as the Ryan White grantee, does not permit the payment of case management salaries or related expenses using Ryan White CARE Act funds.*

In each contract year, APPLICANT shall provide, for a minimum of one hundred sixty five (165) individuals with HIV in Maui County, new or updated client assessments for case management or other support services provided/made accessible under this scope of services. All staff providing case management services, shall meet relevant HIV case management standards (see Attachment D). Services to be provided shall include:

- 1) **Intake/initial assessment:** client's health and social needs including: mental health assessment/counseling, substance abuse assessment/counseling, health-care treatment assessment/counseling, housing needs assessment/counseling, risk behavior assessment/counseling/education, nutritional assessment/counseling, crises intervention, client family counseling, benefits assessment/counseling.
- 2) **Client service plan:** development of written client service plan, case notes and documentation. Each client shall be assigned an initial acuity level based on the statewide acuity level measurement tools.

- 3) **Provision of priority services i - iv below**, based on level of acuity:
- i. Medical Case Management
  - ii. Specialized Case Management
  - iii. Social Service Case Management
  - iv. Client Support Services
- 4) **Ongoing assessment:** Health and social needs and acuity level of each client shall be reviewed and updated on a frequency determined by the level of client acuity set out in Attachment F, "Client Acuity Determination." The review process and results shall be recorded in the client's file and the service plan updated as needed.

### **Priority One: Medical Case Management**

Under this contract the APPLICANT shall place the highest priority on the provision of medical case management services to clients. Medical case management service has the goal of assuring clients have access to HIV and related primary care services, that clients can access services that will allow them to maintain access to treatment and have the information and support necessary to maximize the potential for successful treatment outcomes. APPLICANT shall have the capacity to provide the medical case management services listed below. Access to medical case management services not directly provided by the APPLICANT's staff shall be assured in a detailed Memorandum of Agreement with an outside provider who will provide the medical case management services. In most cases specialized or specially trained staff or an outside contracted service provider will be needed to provide services in this priority. APPLICANT shall provide specific information on the qualification/experience of individuals providing these services.

### **Medical Case Management shall include the following functions:**

1. Assist uninsured clients in applying for Medicaid (Quest) and/or Medicare.
2. Assist eligible clients in applying for HSPAMM, HDAP and HCOBRA.
3. Assist eligible clients in accessing health related services through staff resources and/or develop formalized linkages through Memorandums of Agreement with providers to facilitate service delivery. Services include but are not limited to, primary care, nutritional assessment and counseling, dental care, mental health care, substance abuse treatment and home health services.
4. Assist eligible clients and APPLICANT's other staff in interfacing with health care organizations and related agencies (particularly community primary care centers) to facilitate the delivery of health care services.
5. Coordinate with other community based organizations to link eligible clients with social support services such as transportation, food and housing.
6. Develop and maintain an updated resource list of current HIV care service providers and make this list available to clients.
7. Assist, encourage and support access to primary medical care. Document fully cases of clients not accessing primary medical care and specifically HAART

- therapies, reasons why not and if any assistance is needed from the agency to overcome barriers to access.
8. Assist clients to better understand, utilize and benefit from primary medical care. Ascertain the treatment advocacy needs of individual clients and provide necessary support to meet them.

## **Priority Two: Specialized Case Management**

Through this funding, APPLICANT shall place high priority on the delivery of specialized case management services. These services shall be targeted to higher acuity clients in “special HIV infected populations” including multiply diagnosed individuals (HIV and substance misuser, and/or mental illness and/or homeless); and Native Hawaiians; and women, children and families.

In most cases specialized or specially trained staff or outside contracted service providers will be needed to provide specialized case management services, particularly to serve individuals with mental illness and/or substance misuse. APPLICANT shall have the capacity to provide the specialized case management services listed below. Access to services not directly provided by the APPLICANT’s staff shall be assured in a detailed Memorandum of Agreement with an outside provider who will provide the specialized case management services. APPLICANT shall provide copies of the Memorandum of Agreement or specific information on the qualifications/experience of individuals who will be providing these services as an attachment to the application.

### **Specialized case management services shall include:**

#### **A. For Multiply diagnosed individuals:**

1. Assure that all HIV-related services shall be accessible to multiply diagnosed and/or homeless clients through specially trained staff who can provide services and linkages based upon a low-threshold, harm reduction model of service delivery;
2. Utilize non-traditional methods, such as outreach and drop-in services, to assist multiply diagnosed and/or homeless clients to access services and to prevent clients from falling through gaps and not receiving care;
3. Train staff to provide user-friendly, individualized, non-judgmental services which engage clients at the clients' current level of need, in places where clients gather, and where they feel comfortable;
4. Allocate adequate resources, including personnel time, to ensure that intensive case management is provided to multiply diagnosed and/or homeless clients;

5. Collaborate with the HIV housing services PROVIDER to develop a continuum of housing options for multiply diagnosed and/or homeless clients, with a special focus on the development of intermediate care facilities; and
6. Implement and maintain a program to provide multiply diagnosed and/or homeless clients with access to services and to help assure they remain in care.

**B. For Native Hawaiians:**

Provide access to services for HIV-positive Native Hawaiians and help assure that they remain in care. The APPLICANT shall work with established Native Hawaiian organizations to develop or refine culturally appropriate programs. To the extent possible, the APPLICANT shall review and incorporate Native Hawaiian, Native Alaskan, and Native American case management models established by other organizations nationwide.

**C. For Women, children and families:**

1. Provide access to services for HIV-positive women and HIV-positive children and assist them to remain in care.
2. Provide support services for HIV-positive parents and/or parents/guardians of HIV-positive children so children may continue to pursue an education despite the physical limitations imposed by HIV. For HIV-positive youths, support services shall include, but not be limited to: nutritious food; appropriate clothing and school supplies; transportation to and from, and within, school as needed; accommodations for in-school medication schedules; and peer support groups.
3. Provide counseling, support, and information and referral services for HIV-positive women concerning HIV prevention related to pregnancy and childbirth.

APPLICANT shall collect and provide to its clients, staff and SAPB, data related to enrollment, needs of and services provided to special populations. Data elements will be determined by SAPB but at minimum, APPLICANT shall generate counts of clients in each of the following categories:

- (1) Chronically homeless (clients with extended and/or frequent periods of being unsheltered);
- (2) Diagnosed mentally ill;
- (3) Chronically dysfunctional (clients with extended and/or frequent periods of serious difficulty coping with the stresses of daily living due to mental/emotional impairment. This impairment is usually characterized by an inability to follow

- through with AIDS service plans and indicates a need for intensive case management. These clients may or may not be diagnosed with mental illness.);
- (4) Drug misusers, including injection drugs and separately, other illicit drugs, alcohol, or prescription drugs;
  - (5) Women, children, and families;
  - (6) Native Hawaiians;
  - (7) Inmates;
  - (8) Sex workers; and
  - (9) Clients on parole or probation.

### **Priority Three: Social Service Case Management**

Although some components of social service case management shall be offered to all clients, it shall be made available primarily to higher acuity level clients including those served in Priority I and II above. It is expected that many clients enrolled in the agency need not receive more than the minimum of social service case management on an on-going basis. Efforts should be made to enable clients to successfully access information and services while limiting case manager involvement as much as possible. Social service case management services should be increasingly available and accessible if the client moves to a higher acuity level, as indicated by the statewide client acuity measurement tool.

#### **Social case management services may include the following:**

Intake/initial assessment, mental health assessment/counseling, substance abuse assessment/counseling, health-care treatment assessment/counseling, housing needs assessment/counseling, risk behavior assessment/counseling/education, nutritional assessment/counseling, crises intervention, client family counseling, benefits assessment/counseling, service coordination planning, legal document development, periodic client monitoring/reassessment, case notes documentation, referral tracking entry, provider office visit, home visit, hospital visit, field/inter-office visit, generic assistance liaison, housing assistance liaison, legal advocacy assistance liaison, financial benefits liaison, health care benefits/insurance liaison, health care treatments liaison, funeral/estate coordination liaison, transportation activities, volunteer coordination/placement.

### **Priority Four: Client Support Services**

At least ten percent (10%) of the funding from this contract OR an equivalent amount of other non State or non Ryan White funding is to be used for specific services for higher acuity individuals to access primary medical care and become stable in their living situation. The use of this funding needs to be clearly documented by the agency.

#### **Client support services may include the following:**

- (1) Provider-specific services including: financial aid, emergency drug purchase, emergency health premium assistance, nutrition/food bank assistance, food certificates, health insurance, drug assistance.
- (2) External contractor or provider-specific services, including: initial dietary assessment/counseling for nutritional assistance programs, follow-up dietary assessment/counseling for nutritional assistance programs, initial medical examination/evaluation, follow-up medical examination/evaluation, medical diagnostic testing, medical care assistance, specialized health care assistance, alternative medical care assistance, rehabilitation therapy assistance, nursing attendant home care, para-professional attendant home care, medical equipment purchase, dental care assistance, primary and secondary HIV prevention, Hepatitis B counseling/testing, tuberculosis counseling/testing, Hepatitis B vaccination, emergency housing assistance, respite housing assistance, residential housing assistance, para-professional home hospice care, institutional hospice care assistance, psychological assessment/counseling/treatment, substance abuse treatment/counseling, foster care/adoption, respite/child care assistance, legal services assistance.

## **B. Management Requirements**

### **1. Personnel**

#### **Staff Training and Development**

All staff providing services under this procurement shall have demonstrated skills and expertise in the service areas in which they will be working. The necessary qualifications and experience for case managers and supervisors are provided in the HIV Case Management Standards in Attachment D. Medical case managers and those providing specialized case management for special populations require qualifications/experience that make them appropriate to provide these specialized services to clients. These shall be documented in the application.

Many of the appropriate skills for case managers may have been acquired through education, related work experience or through participation in agency or other training programs, particularly those conducted by the training agency contracted by SAPB to provide training for case management and support service providers.

- a. New staff members shall receive training on HIV infection and AIDS within sixty (60) days of employment and before providing services to the public. Training shall include a basic HIV 101 training based on the topics listed below to ensure that staff



- i. have correct factual knowledge of HIV and STDs including:
  - history and epidemiology of the HIV epidemic
  - biology of HIV
  - modes of HIV transmission
  - information on STD and viral hepatitis
  - prevention of transmission
  - populations at risk for HIV
  - utilizing theories of behavioral interventions
  - treatment of HIV infection
  - referral for care/treatment of STD and viral hepatitis
  - community resources statewide
  - HIV antibody counseling and testing sites statewide and,
- ii. understand clearly the populations to be served under this contract
- iii. understand the purposes of activities they will be implementing and are oriented to behavioral interventions
- iv. are familiar with the specific requirements of the contract
- v. understand the basics about HIV/AIDS, STD and viral hepatitis prevention
- vi. understand the procedures laid out in the Manual of Operations, and receive a copy of the same and have signed off
- vii. understand clearly the populations to be served under this contract
- viii. understand the purposes of activities they will be implementing are oriented to behavioral interventions

Arrangements for, and any expenses related to, this training shall be the responsibility of the contracted agency. Completion by each new staff member of all elements of this training, and how this training was provided, shall be reported to the SAPB in the quarterly program reports.

- b. APPLICANT shall provide the STD/AIDS Prevention Branch with a copy of the agency's training curriculum and manual based on (a) and (b) above which are used to train new case managers, by December 31, in the first year of the contract.
- c. A minimum of:
  - i. one case management staff member must attend, and all case managers are strongly encouraged to attend, each of the four (4) or more, four to eight (4-8) hour statewide HIV case management and care

service training sessions provided by a training provider contracted by SAPB;

- ii. one case management clinical supervisor must attend each of three (3) statewide training sessions for case management clinical and administrative supervisors provided by a training provider contracted by SAPB; and
- iii. all case management staff shall participate in each of the two (2) or more, four to eight (4-8) hour HIV case management and care service training sessions provided on site at each agency by a training provider contracted by SAPB.

Costs incurred for travel and other expenses are borne by the APPLICANT and should appear in the budget submitted with the proposal. Agencies shall put in place a system to share the information and skills from the training with other case management staff that did not attend the training. Important training topics will be incorporated by the agency into the training manuals discussed in (b) above.

## **2. Administrative**

During the contract period, APPLICANT shall:

- a. develop user friendly written description of the case management and client support services and resources that are available from the agency and in the geographic area. These documents shall be accessible to all clients;
- b. provide all clients with a mechanism in writing of registering complaints and dissatisfaction which ensures that valid concerns are addressed. Clients shall be involved in the grievance process;
- c. ensure staff providing services under this scope of services are provided with a copy of the scope in the final contract prior to the start of the contract and quarterly data related to special populations and aggregate client acuity levels. Maintain documentation of when this was done;
- d. develop a written plan addressing the transportation needs of the clients, including a variety of options and resources to assist HIV-positive individuals to access services. These transportation options may include, but are not limited to, taxi vouchers, mileage reimbursement, fuel vouchers for volunteers and consumers, discretionary funds for

transportation, car insurance, car repair, access to vehicles for moving to a new location, van pools, and linkages with other agencies that provide transportation services;

- e. develop a network of referrals and a placement system with local job training organizations to provide retraining/education for adults who are ready to return to work so they may be competitive (given the limitations imposed by HIV). APPLICANT shall also provide support services to clients so they may continue working as their medical condition changes, and participate in existing job training and educational programs. Other support services may include culturally-appropriate counseling, vocational rehabilitation, transportation, information sources, scholarships or, tuition waivers, etc;
- f. conduct the uniform client satisfaction survey, approved for statewide use by SAPB, at least once per twelve (12) month fiscal year period, on the quality of services provided by APPLICANT, and provide data and analysis to clients of the organization and SAPB;
- g. participate in the development and delivery of a comprehensive primary prevention program for HIV positive individuals receiving case management services based on the recommendations of the CPG and policy of SAPB;
- h. maintain and respect the confidentiality of client medical records and information, including HIV status and any test results, pursuant to all relevant sections of the Hawaii Revised Statutes and HIPPA;
- i. have a minimum of two consumer representatives, nominated by consumers, on its board of directors. These board members shall represent the diverse consumer/client populations. The names of the consumer representatives on the board shall be included with the application and as part of each quarterly report. This consumer representative requirement may be waived if the APPLICANT can demonstrate that it made a good faith effort to comply. This shall be submitted to SAPB in writing.

### **3. Quality assurance and evaluation specifications**

Activities to monitor, evaluate, and improve the results of case management services based on the Case Management Standards in Attachment D must be an integral part of program design. APPLICANT shall submit a detailed overview of who and how quality assurance will be carried out in the agency must be included with the proposal. Hawaii CARES is currently drafting service delivery standards for case management. SAPB, with community participation, plans to further develop and finalize these standards and will issue monitoring and quality assurance protocol related to these standards during the term on the contract.

### **4. Output and performance/outcome measurements**

Outcome and performance measurements must be an integral part of the program design, and these measurements must be included in the proposal.

**5. Experience**

The Applicant shall have a history of providing the services sought in this procurement, or similar services, to either the target population or other disabled populations.

**6. Coordination of services**

Not Applicable

**7. Reporting requirements for program and fiscal data**

- a. APPLICANT shall use and maintain a standardized client services data management and reporting system as identified by SAPB. This data system shall contain common intake information across all provider agencies and additional information related to needs assessment, service utilization and other data elements.
- b. APPLICANT shall provide SAPB with written program and budget reports within thirty (30) days after the end of each quarter. These reports shall indicate all services provided, expenses incurred, and the APPLICANT's progress in providing the services required under this procurement.
- c. APPLICANT shall provide the SAPB with written quarterly narrative reports of approximately two (2) pages, describing overall progress toward achieving contract objectives. The quarterly reports shall describe activities conducted, number of individuals in the target population served, problems/issues in service delivery, and a brief discussion of next quarter's activities and goals.
- d. APPLICANT shall provide the SAPB with a final written report within thirty (30) calendar days after the end of each contract period which reflects results of the APPLICANT's program, including accomplishments of service requirements, target populations served, development of program methodology, and adherence to the projected budget costs.
- e. APPLICANT shall provide the SAPB with the names and FTE of all staff positions funded under this procurement and under which service priority they are providing services and their qualifications and experience. The name, qualifications and experience of the individual providing clinical supervision shall be included. The APPLICANT shall indicate any vacant STATE-funded positions as part of each quarterly report and its plans to fill the vacancy.

**8. Pricing structure or pricing methodology to be used**

Pricing structure based on cost reimbursement

**9. Units of service and unit rate**

NOT APPLICABLE

**IV. Facilities**

Applicant's facilities must meet all applicable Federal and State requirements for accessibility and safety.

## **Section 3**

# **Proposal Application Instructions**

# **Section 3**

## **Proposal Application Instructions**

### **General instructions for completing applications:**

- *Proposal Applications shall be submitted to the state purchasing agency using the prescribed format outlined in this section.*
- *The numerical outline for the application, the titles/subtitles, and the applicant organization and RFP identification information on the top right hand corner of each page should be retained. The instructions for each section however may be omitted.*
- *Proposal Applications must be in a standard 12 point font, single spaced, with one inch margins.*
- *Page numbering of the Proposal Application should be consecutive, beginning with page one and continuing through for each section. See sample table of Contents*
- *Proposals may be submitted in a three ring binder (Optional).*
- *Tabbing of sections (Recommended).*
- *Applicants must also include a Table of Contents with the Proposal Application. A sample format is reflected in Section 5, Attachment B of this RFP.*
- *A written response is required for each item unless indicated otherwise. Failure to answer any of the items will impact upon an applicant's score.*
- *Applicants are strongly encouraged to review evaluation criteria in Section 4, Proposal Evaluation when completing the proposal.*
- *This form (SPO-H-200A) is available on the SPO website (for the website address see the Proposal Application Checklist in Section 5, Attachments). However, the form will not include items specific to each RFP. If using the website form, the applicant must include all items listed in this section.*

### **The Proposal Application comprises the following sections:**

- *Proposal Application Identification Form*
- *Table of Contents*
- *Program Overview*
- *Experience and Capability*
- *Project Organization and Staffing*
- *Service Delivery*
- *Financial*
- *Other*

#### **I. Program Overview**

Applicant shall give a brief overview to orient evaluators as to the program/services being offered.

## **II. Experience and Capability**

### **A. Necessary Skills**

The applicant shall demonstrate that it has the necessary skills, abilities, and knowledge relating to the delivery of the proposed services.

### **B. Experience**

The applicant shall provide a description of projects/contracts pertinent to the proposed services.

### **C. Quality Assurance and Evaluation**

The applicant shall describe its own plans for quality assurance and evaluation for the proposed services, including methodology.

### **D. Coordination of Services**

The applicant shall demonstrate the capability to coordinate services with other agencies and resources in the community.

### **E. Facilities**

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the proposed services. If facilities are not presently available, describe plans to secure facilities. Also describe how the facilities meet ADA requirements, as applicable, and special equipment that may be required for the services.

## **III. Project Organization and Staffing**

### **A. Staffing**

#### **1. Proposed Staffing**

The applicant shall describe the proposed staffing pattern, client/staff ratio and proposed caseload capacity appropriate for the viability of the services. (Refer to the personnel requirements in the Service Specifications, as applicable.)

#### **2. Staff Qualifications**

The applicant shall provide the minimum qualifications (including experience) for staff assigned to the program. (Refer to the qualifications in the Service Specifications, as applicable)

### **B. Project Organization**

#### **1. Supervision and Training**

The applicant shall describe its ability to supervise, train and provide administrative direction relative to the delivery of the proposed services.



## **2. Organization Chart**

The applicant shall reflect the position of each staff and line of responsibility/supervision. (Include position title, name and full time equivalency) Both the “Organization-wide” and “Program” organization charts shall be attached to the Proposal Application.

## **IV. Service Delivery**

Applicant shall include a detailed discussion of the applicant’s approach to applicable service activities and management requirements from Section 2, Item III. - Scope of Work, including (if indicated) a work plan of all service activities and tasks to be completed, related work assignments/responsibilities and timelines/schedules.

### **A. Program Proposal**

The applicant shall provide a detailed description of its program(s) under this RFP. The program proposal must include a detailed description of how the applicant plans to carry out each of the tasks and responsibilities listed under the Scope of Work.

### **B. Goals and Objectives**

Program goals: For each Service Activity under the Scope of Work the applicant shall provide process and outcome objectives. Each objective should be measurable and should clearly state the following:

1. who;
2. is going to be doing what;
3. when;
4. how much; and
5. how it will be measured; and
6. location(s) of service(s).

### **C. Quality Assurance and Evaluation**

The Applicant shall provide a description of its quality assurance and evaluation activities. Include what information will be used to evaluate progress on the objectives stated above. Indicate who will collect this information, and how it will be collected.

## **V. Financial**

### **A. Pricing Structure**

Applicant shall submit a cost proposal utilizing the pricing structure designated by the state purchasing agency. The cost proposal shall be attached to the Proposal Application.

All budget forms, instructions and samples are located on the SPO website (see the Proposal Application Checklist in Section 5 for website address). The following budget form(s) shall be submitted with the Proposal Application:

SPO-H-205  
SPO-H-206A  
SPO-H-206B  
SPO-H-206C  
SPO-H-206D  
SPO-H-206E  
SPO-H-206F  
SPO-H-206G  
SPO-H-206H  
SPO-H-206I  
SPO-H-206J

On Budget Form SPO-H-205, APPLICANT shall indicate all expenditures proposed under this RFP. A minimum of three (3) columns **must** be included on SPO-H-205 (see Section 5, Attachment E: Sample Form SPO-H-205):

- one column showing all proposed program(s) specific direct service costs funded under this RFP;
- one column showing all proposed administrative and program support costs funded under this RFP;
- one column showing the total budget request which combines the above two (2) and any other columns which show expenditures proposed under this RFP.

For purposes of this RFP, “administrative and program support costs” include lease/rental of space, lease/rental of equipment, repair and maintenance, and general administration and general expenses, such as the salaries and expenses of executive officers, personnel administration and accounting. “Direct service costs” include wages and benefits of employees who directly provide the services, and the cost of materials, equipment, and supplies used to provide these services, and any staff training required under the agreement.

The applicant must include a detailed line by line narrative justification for all budget items proposed under this RFP (see Section 5, Attachment C: Sample Narrative Budget Justification).

## **B. Other Financial Related Materials**

### **Accounting System**

In order to determine the adequacy of the applicant’s accounting system as described under the administrative rules, the following documents **must** be attached as part of the Proposal Application:

- A copy of the Applicant’s most recent financial audit.

## **VI. Other**

### **Litigation**

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgment. If applicable, please explain.

## **Section 4**

### **Proposal Evaluation**

## **Section 4**

### **Proposal Evaluation**

#### **I. Introduction**

The evaluation of proposals received in response to the RFP will be conducted comprehensively, fairly and impartially. Structural, quantitative scoring techniques will be utilized to maximize the objectivity of the evaluation.

#### **II. Evaluation Process**

The procurement officer or an evaluation committee of designated reviewers selected by the head of the state purchasing agency or procurement officer shall review and evaluate proposals. When an evaluation committee is utilized, the committee will be comprised of individuals with experience in, knowledge of, and program responsibility for program service and financing.

The evaluation will be conducted in three phases as follows:

- Phase 1 - Evaluation of Proposal Requirements
- Phase 2 - Evaluation of Proposal Application
- Phase 3 - Recommendation for Award

#### **Evaluation Categories and Threshold**

<b><u>Evaluation Categories</u></b>	<b><u>Possible Points</u></b>
<b>Administrative Requirements</b>	
<b>Proposal Application</b>	<b>100 Points</b>
Program Overview	0 points
Experience and Capability	20 points
Project Organization and Staffing	15 points
Service Delivery	55 points
Financial	<u>10 Points</u>
<b>TOTAL POSSIBLE POINTS</b>	<b>100 Points</b>

#### **III. Evaluation Criteria**

##### **A. Phase 1 - Evaluation of Proposal Requirements**

**(1) *Administrative Requirements***

- Application Checklist
- Registration (if not pre-registered with the State Procurement Office)
- Certifications

**(2) *Proposal Application Requirements***

- Application Identification Form (Form SPO-H-200)
- Table of Contents
- Program Overview
- Experience and Capability
- Project Organization and Staffing
- Service Delivery
- Financial (All required forms and documents)
- Program Specific Requirements (as applicable)

**B. Phase 2 - Evaluation of Proposal Application (100 Points)**

***Program Overview***

No points are assigned to Program Overview. The intent is to give the applicant an opportunity to orient evaluators as to the service(s) being offered.

**1. Experience and Capability (20 Points)**

The State will evaluate the applicant's experience and capability relevant to the proposal contract, which shall include:

**A. Necessary Skills**

- Demonstrated skills, abilities, knowledge of, and experience relating to the delivery of the proposed services.

**B. Experience**

- Demonstrated capability to provide requested services.

**C. Quality Assurance and Evaluation**

- Sufficiency of quality assurance and evaluation plans for the proposed services, including methodology.

**D. Coordination of Services**

- Demonstrated capability to coordinate services with other agencies and resources in the community.

**E. Facilities**

- Adequacy of facilities relative to the proposed services.

**2. Project Organization and Staffing (15 Points)**

The State will evaluate the applicant's overall staffing approach to the service that shall include:

**A. Staffing**

- Proposed Staffing: That the proposed staffing pattern, client/staff ratio, and proposed caseload capacity is reasonable to insure viability of the services.
- Staff Qualifications: Minimum qualifications (including experience) for staff assigned to the program.

**B. Project Organization**

- Supervision and Training: Demonstrated ability to supervise, train and provide administrative direction to staff relative to the delivery of the proposed services.
- Organization Chart: Approach and rationale for the structure, functions, and staffing of the proposed organization for the overall service activity and tasks.

**3. Service Delivery (55 Points)**

*The State will evaluate the applicant's overall approach service delivery that shall include:*

- Tasks to be completed.
- Service activities.
- Work plan.
- Management plan.
- Timeline and schedules.

**4. Financial (10 Points)**

Pricing structure based on cost reimbursement:

- Personnel costs are reasonable and comparable to positions in the community.

- Non-personnel costs are reasonable and adequately justified.
- To what extent does the budget support the scope of service and requirements of the Request for Proposal?
- Adequacy of accounting system.

**C. Phase 3 - Recommendation for Award**

Each notice of award shall contain a statement of findings and decision for the award or non-award of the contract to each applicant.



## **Section 5**

## **Attachments**

# **Section 5**

## **Attachments**

- A. Proposal Application Checklist
- B. Proposal Application Sample Table of Contents
- C. Sample Narrative Budget Justification
- D. HIV Case Management Standards
- E. Sample: SPO-H-205
- F. Client Acuity Determination

# **Attachment A**

## **Proposal Application Checklist**

## Proposal Application Checklist

Applicant: \_\_\_\_\_

RFP No.: \_\_\_\_\_

The applicant's proposal must contain the following components in the order shown below. This checklist must be signed, dated and returned to the state purchasing agency as part of the Proposal Application. \*SPO-H forms are located on the web at <http://www.spo.hawaii.gov> Click *Procurement of Health and Human Services* and *For Private Providers*.\*

Item	Reference in RFP	Format/Instructions Provided	Required by Purchasing Agency	Completed by Applicant
<b>General:</b>				
Proposal Application Identification Form (SPO-H-200)	Section 1, RFP	SPO Website*	X	
Proposal Application Checklist	Section 1, RFP	Attachment A	X	
Table of Contents	Section 5, RFP	Section 5, RFP	X	
Proposal Application (SPO-H-200A)	Section 3, RFP	SPO Website*	X	
Registration Form (SPO-H-100A)	Section 1, RFP	SPO Website*	(Required if not Registered)	
Tax Clearance Certificate (Form A-6)	Section 1, RFP	Dept. of Taxation Website (Link on SPO website)*		
Cost Proposal (Budget)				
SPO-H-205	Section 3, RFP	SPO Website*	X	
SPO-H-205A	Section 3, RFP	SPO Website* Special Instructions is applicable, Section 5		
SPO-H-205B	Section 3, RFP,	SPO Website* Special Instructions, Section 5		
SPO-H-206A	Section 3, RFP	SPO Website*	X	
SPO-H-206B	Section 3, RFP	SPO Website*	X	
SPO-H-206C	Section 3, RFP	SPO Website*	X	
SPO-H-206D	Section 3, RFP	SPO Website*	X	
SPO-H-206E	Section 3, RFP	SPO Website*	X	
SPO-H-206F	Section 3, RFP	SPO Website*	X	
SPO-H-206G	Section 3, RFP	SPO Website*	X	
SPO-H-206H	Section 3, RFP	SPO Website*	X	
SPO-H-206I	Section 3, RFP	SPO Website*	X	
SPO-H-206J	Section 3, RFP	SPO Website*	X	
<b>Certifications:</b>				
<i>Federal Certifications</i>		Section 5, RFP		
Debarment & Suspension		Section 5, RFP		
Drug Free Workplace		Section 5, RFP		
Lobbying		Section 5, RFP		
Program Fraud Civil Remedies Act		Section 5, RFP		
Environmental Tobacco Smoke		Section 5, RFP		
<b>Program Specific Requirements:</b>				
Narrative Budget Justification			X	

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

# **Attachment B**

## **Proposal Application Sample Table of Contents**

## **Sample Table of Contents**

<b>I.</b>	<b>Program Overview</b> .....	1
<b>II.</b>	<b>Experience and Capability</b> .....	1
	A.    Necessary Skills .....	2
	B.    Experience.....	4
	C.    Quality Assurance and Evaluation.....	5
	D.    Coordination of Services .....	6
	E.    Facilities.....	6
<b>III.</b>	<b>Project Organization and Staffing</b> .....	7
	A.    Staffing.....	7
	1.    Proposed Staffing.....	7
	2.    Staff Qualifications .....	9
	B.    Project Organization .....	10
	1.    Supervision and Training.....	10
	2.    Organization Chart (Program & Organization-wide) (See Attachments for Organization Charts)	
<b>IV.</b>	<b>Service Delivery</b> .....	12
<b>V.</b>	<b>Financial</b> .....	20
	See Attachments for Cost Proposal	
<b>VI.</b>	<b>Litigation</b> .....	20
<b>VII.</b>	<b>Attachments</b>	
	A.    Cost Proposal	
	SPO-H-205 Proposal Budget	
	SPO-H-206A Budget Justification - Personnel: Salaries & Wages	
	SPO-H-206B Budget Justification - Personnel: Payroll Taxes and Assessments, and Fringe Benefits	
	SPO-H-206C Budget Justification - Travel: Interisland	
	SPO-H-206E Budget Justification - Contractual Services – Administrative	
	B.    Other Financial Related Materials	
	Financial Audit for fiscal year ended June 30, 1994	
	C.    Organization Chart	
	Program	
	Organization-wide	
	D.    Performance and Output Measurement Tables	
	Table A	
	Table B	
	Table C	

# **Attachment C**

## **Sample Narrative Budget Justification**

## **SAMPLE: NARRATIVE BUDGET JUSTIFICATION**

### **1999 HIV Prevention Budget and Justification**

#### **Summary**

Hawai'i's FY 1999 HIV/AIDS Prevention Cooperative Agreement is requesting \$1,735,732 in federal financial assistance. This is the same amount received in FY 1998. In accordance with the revised *1999 HIV Prevention Plan Update for the State of Hawai i*, adjustments have been made to the contracts for HIV prevention activities to increasingly focus on those priority groups as identified by the plan. At a time of level funding and increasing demand for services, the STD/AIDS Prevention Branch of the Department of Health (DOH) has made every effort to reduce costs without negatively impacting upon the delivery of services as well as conforming to the recommendations of the Hawai i HIV Prevention Community Planning Group.

#### **I. PERSONNEL \$502,500**

Request includes 16 previously funded positions.

##### **A. Disease Intervention Specialists (DIS) 265,200**

8.5 Positions: (Employee 1), (Employee 2), (Employee 3), (Employee 4), (Employee 5), (Employee 6), (Employee 7), (Employee 8), and (Employee 9).

These positions are under the STD/AIDS Prevention Branch of the Department of Health (DOH). Although they are housed in different health centers, they all have the same functions -- HIV antibody counseling and testing. The staff in these positions will be performing full-time HIV antibody counseling and testing (C&T ) activities including: Phlebotomy; pretest counseling; post-test counseling; encouraging partner notification and referral of seropositive patients, including guidance of appropriate methods of referrals, and notifying sex and needle-sharing partners of seropositive patients, including counseling and testing as appropriate. These positions will also be involved in outreach counseling and testing with OraSure by accompanying CHOW outreach workers on all islands. They also will collaborate with other agencies to provide counseling and testing to at-risk populations. These positions will allow the program to accomplish



the objectives in Counseling, Testing, Referral, and Partner Notification (CTRPN).

Five positions will be working in the HIV Antibody Clinic at the Diamond Head Health center on O'ahu during various days. They also provide HIV antibody counseling, testing, referral and partner notification services in support of the STD Clinic. The HIV Antibody Clinic at the Diamond Head Health Center currently performs 600 HIV antibody tests per month. These five positions will also provide outreach counseling and testing services in other sites which include drug treatment facilities, TB Clinic, family planning clinics, colleges, prisons, medical clinics, and the CHOW mobile van. These counseling and testing sites are scheduled during various days and hours.

Four positions are assigned to the neighbor islands -- one for Maui County; two for the island of Hawai'i, which is the largest island geographically and has one position assigned to each of the two main population centers on the opposite sides of the island -- Hilo and Kona; and one half-time position for the island of Kaua'i.

B. Clerk Stenographer 22,100

(Employee 10)

This position is under the DOH and will be housed on O'ahu. This position will be responsible for all the clerical, stenographic and statistical functions of the HIV Antibody Counseling and Testing Program, including: preparing HIV antibody clinic records and forms, posting of laboratory results onto medical records; filing of HIV antibody medical records, tabulating all epidemiologic data through an electronic data system; providing stenographic support to the DIS; and preparing all purchase orders for office and laboratory supplies of the HIV Antibody Counseling and Testing Program.

C. Public Health Educator IV 138,700

4 Positions: (Employee 11), (Employee 12), (Employee 13), and vacant to be hired.

These four public health educators are located on O'ahu. Each of these educators will undertake a diversity of statewide, community-based activities to implement the impact objectives stated in the grant. These educators will coordinate and collaborate with government and community leaders throughout the state to

establish networks which facilitate HIV/STD education among populations at risk for HIV. These educators will continue to provide some direct service HIV/STD education to populations at high risk for HIV, including men who have sex with men, injection drug users, women, transgender, youth at risk for HIV, cultural and ethnic minority populations, incarcerated populations, and other underserved populations at risk for HIV. However, the priority for these health educators will be community coordination and providing technical assistance to HIV/STD-related agencies statewide.

<b>II.</b>	<b>FRINGE BENEFITS</b>	
	27.17% x \$502,500	\$136,529

<b>TOTAL PERSONNEL COSTS</b>	<b>\$639,029</b>
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<b>III.</b>	<b>TRAVEL</b>	<b>\$ 44,880</b>
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A.	In-state Travel	33,150
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1.	Interisland Travel	23,650
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a.	Counseling and Testing	2,530
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This amount is necessary for the four neighbor island disease intervention specialists to travel to O'ahu for the annual staff meeting and training. The costs of the meetings include \$300 (\$74 per person x 4 people) air fare; per diem costs of \$160 (\$40 per day x 4 people); car rental costs of \$40; and airport parking fees of \$40 (\$10 per day x 4 people).

Interisland travel is also necessary for the CTRPN trainer to travel to each island to provide HIV Prevention Counseling training to staff at community agencies and at AIDS service organizations. Costs for this activity include \$150 (\$74 per person X 2 trips) airfare; per diem costs of \$720 (\$80 per day X 9 days); car rental costs of \$360 (\$40 per day X 9 days); and airport parking fees of \$100 (\$10 per day X 10 days).

b. Community Planning 13,170

This amount is necessary for the neighbor island community planning group representatives to travel to O'ahu to attend Community Planning Group (PCPG) and PCPG committee meetings. The costs of the meetings include \$6,660 (\$74 per person X 9 people X 10 meetings) air fare. Funding is also necessary for the seven committees to meet on O'ahu for a total of 45 meetings.

c. Health Education/Risk Reduction and Public Information 2,600

Travel costs are also necessary for the 4 public health educators on O'ahu for use of their personal car for travel to various AIDS prevention activities. The estimated cost is \$2,400 (\$50 per month X 4 people X 12 months). The clerk stenographer also is assigned duties which involves the use of her personal car for such travel to various AIDS meetings to take minutes and travel to the various vendors to pick up educational supplies. The estimated cost is \$200 (\$17 per month X 12 months).

**IV. SUPPLIES \$101,893**

A. ELISA Kits (serum) 50,400  
\$3.00 per test X 16,800

This amount is necessary to purchase the HIV antibody testing kits for the Laboratories Branch of the Department of Health. An estimated 14,000 tests will be performed by the laboratory for HIV antibody testing during this budget period. Assuming an average of 20% of the tests will be performed for repeat testing of positives/indeterminates and for quality control testing as required by the manufacturer as well as for CLIA, a total of 16,800 tests will be performed. This total includes all tests performed through the counseling, testing and partner notification program. Thus, the estimated cost for this budget period is \$50,400. (16,800 tests X \$3.00/test)

- B. Reagents and Laboratory Supplies 5,500  
(\$25 per test X 220 tests)

This amount is necessary to purchase laboratory supplies to perform the Western Blot test. During the budget period, we plan to perform a total of 14,000 tests. Assuming a 1.6% positivity rate/indeterminate rate, we may anticipate performing 220 Western Blot tests.

- C. Laboratory Supplies 1,000

This amount is necessary to purchase the miscellaneous laboratory supplies to perform the ELISA and Western Blot tests. Costs include dilution tubes, storage vials, gloves, certified mailing packages and disinfectants.

- D. Other Counseling and Testing Supplies 17,600

1. Laboratory Forms 8,300

11,000 forms X \$.75 per form

2. Paper Supplies and Printing Costs 1,000

This amount is needed for AIDS Informed Consent Forms and educational supplies.

3. Phlebotomy Supplies 8,300

This amount is necessary to purchase vacutainers, needles, needle holders, bandaids, cotton, alcohol, gloves and sharps collectors necessary for performing phlebotomy on 11,000 patients at \$.75 per patient.

- E. HIV Antibody Counseling and Testing Supplies (oral) 13,400

The HIV antibody counseling and testing program is planning to continue the outreach program to provide HIV counseling and testing services through oral collection devices to hard to reach men who have sex with men as well as IDUs. Assuming an average of 20% of the tests will be performed for repeat testing of positives/indeterminates and for quality control testing as required by the manufacturer as well as for CLIA, a total of 1,620 tests will be performed. The laboratory costs include:

HIV antibody test kits  
1,620 tests X \$4.00 per test = \$6,480

OraSure oral specimen collection device  
1,350 X \$3.60 = \$4,860

Reagents and other  
laboratory supplies \$2,060

F. Educational Supplies \$7,200

Educational supplies such as pamphlets are an integral part of the AIDS health education program. Pamphlets and booklets from Channing L. Bete Company and other vendors. The pamphlets are distributed to Hawai'i residents on all islands.

20,000 pamphlets @ \$0.36 7,200

# **Attachment D**

## **HIV Case Management Standards**

# HIV CASE MANAGEMENT STANDARDS

State of Hawaii, Department of Health

November 1, 2000

## I. Definition:

Case management is a system of service provision based on a relationship between the consumer and case manager. This relationship facilitates and increases consumer participation and enables the process to be consumer driven. The case manager collaborates, assesses, facilitates, educates, plans and advocates for the range of services needed by consumer and 'family'. The case manager coordinates with other service providers to create a multidisciplinary team for the consumer. The goal of this system is to increase access to services, improve coordination of services, and promote quality and cost-efficient outcomes to support people living with HIV/AIDS.

### Case Manager Functions

### Case Manager Tasks

Assessor

Outreach  
(Outreach defined by DOH as nontraditional service delivery to assist multiply diagnosed and/or homeless consumers to access services and to prevent consumers from falling through gaps and not receiving care.)

Screening  
Intake/Assessment/Re-assessment  
Problem Identification  
Crisis Intervention  
Termination/Inactive

Planner

Written Service Plan with Goals and Objectives  
Periodic Monitoring/Updating Cases

Facilitator/Coordinator

Referrals  
Brokering/Linking  
Coordinating with Agencies/Workers  
Supportive Counseling  
(Includes Prevention Counseling)

With Families, Significant Others, etc.  
Teach/Encourage Self-Advocacy

Other Functions

Charting, Documentation  
Paperwork/Productivity Reports  
Evaluation/Monitoring/Research  
Teaching/Education

## **II. Standards (Based on Case Management Society of America)**

### **A. Advocacy Standard**

The case manager's central focus is on the consumer and his/her family. The case manager should advocate for the consumer/family at the service-delivery level.

Measurement Criteria: The case manager will:

1. Establish an effective working relationship with the consumer/family, provider and payor.
2. Foster the consumer's/family's decision-making, independence, and growth and development.
3. Educate the consumer/family about appropriate services and support them in moving toward self-care.
4. Advocate for consumers with long-term care needs at local and state government levels through membership in relevant professional organizations and by becoming knowledgeable about new laws and policies that affect consumer care and case management practice.

### **B. Collaboration Standard**

The case manager's role requires collaborative, proactive and consumer-focused relationship to focus, facilitate and maximize consumer outcomes.

Measurement Criteria: The case manager will:

1. Be knowledgeable and educated with regard to the roles and capabilities of various professions and resources.
2. Provide effective leadership and cooperative with community interdisciplinary team members prior to implementing a plan of action.



3. Demonstrate creativity, care, balance and commitment to the individual served.
4. Place the consumer/family outcomes as primary.

### **C. Ethical Standard**

The care manager's practice will be guided by ethical principles.

Measurement Criteria: The case manager will:

1. Provide services based on autonomy, dignity, privacy and personal rights of the individual.
2. Provide information to the individual to facilitate informed health decisions.
3. Seek appropriate resources and consultation to help formulate and to resolve ethical dilemmas.

### **D. Evaluation Standard**

The case manager will use on-going feedback from supervisor, peers, and consumers to measure the effectiveness/necessity/efficacy of the service plan and the quality of the services.

Measurement Criteria: The case manager will:

1. Routinely make a comprehensive and independent assessment of the consumer's status and progress toward reaching the goals set in the service plan.
2. The case manager will monitor cases and make periodic appropriate adjustments in the service plan; providers and services to promote better outcome.

### **E. Legal Standard**

The case manager practices in accordance with applicable laws.

Measurement Criteria. The case manager will:

1. Act in accordance with applicable laws related to:
  - a. Consumer confidentiality and the release of information.
  - b. The Americans with Disabilities Act.
  - c. Worker's Compensation.
  - d. Other consumer protection laws.
  - e. Abuse reporting.

- f. Healthcare proxies (power of attorney for healthcare), and advanced medical directives.
  - g. Benefits and benefits administration.
- 2. Be knowledgeable about the legal scope of practice of various healthcare providers.
- 3. Seek appropriate resources for resolution of legal questions.

NOTE: Professionals are required by law to report child abuse.

## **F. Quality of Care Standard**

Case management is an appropriate, timely and beneficial service which promotes quality of life and cost effective consumer–related outcomes.

Measurement Criteria: The case manager will:

- 1. Work within established standards/ethics for case management practice and those of the case manager’s professional discipline.
- 2. Use evaluation and outcome data to improve ongoing case management services.
- 3. Promote health care outcomes in concert with currently accepted clinical practice guidelines.

## **G. Research Standard**

Case management practice will be based on valid research findings: specifically plans and interventions that result in high quality, cost-effective outcomes.

Measurement Criteria: The case management supervisor will provide case managers with guidance to:

Use intervention substantiated by research that are appropriate to the ongoing care needs of the consumer.

Case management administration will provide case managers with opportunities to:

- 1. Participate in research activities that are appropriate to the practice environment. Such activities could include:
  - a. Design and/or utilize data gathering tools
  - b. Identifying suitable clinical/social problems that would advance or support the consumer’s quality of life.
  - c. Participating in data collection, specifically outcome data

- d. Conducting research independently or in collaboration with others
- e. Critiquing research literature for application to case management practice
- f. Using appropriate research findings in the development of policies, procedures and guidelines for cost-effective, high quality consumer care.

## **H. Resource Utilization Standard**

The case manager will integrate factors related to quality, safety, efficiency and cost-effectiveness in planning, delivering, monitoring and evaluating consumer care.

Measurement Criteria: The case manager will:

- 1. Evaluate safety, effectiveness, cost and potential outcomes when developing a plan for the ongoing care needs of the consumer.
- 2. Refer, broker and/or deliver care based on the ongoing healthcare needs of the consumer and the ability, knowledge and skill of the health and human services providers.
- 3. In conjunction with the consumer/family, link the consumer/family with the most appropriate institutional or community resources, and advocate for development of new resources if gaps exist in the service continuum.
- 4. Monitor and evaluate those services through progress reporting, which would include eligibility, reimbursement and collaboration with other professional service providers.
- 5. Promote the most effective and efficient use of human and financial resources.

## **I. Education/Preparation/Certification Qualification Standard**

Case Management requires professional skills, education and experience.

Measurement Criteria: The case manager will:

- 1. Complete a baccalaureate or higher level educational program for health and human services (social work, sociology, psychology, RN) and a minimum of 12 months of experience working with people with HIV/AIDS or in case management to other populations.
- 2. Individuals with MSW are considered qualified to work as a case manager.

3. A person without a Bachelor's degree will have 12 months experience providing services to the HIV population or working as a case manager and will work to fill in gaps in their education by taking appropriate courses at accredited colleges. Courses to be in the area of study listed in #1 above.
4. Clinical supervision for case managers will be provided by a professional with a Master's degree in a field related to clinical health or social services and experience with HIV/AIDS. These case supervision services will be provided by either a staff member or contracted to a qualified individual.
5. Criteria 1-4 above, will apply to State- or federally-funded case managers and case management supervisors hired after November 1, 2000. However, employees hired prior to this date should be encouraged and supported to meet the criteria.
6. Complete agency orientation and training including HIV and case management training.
7. Maintain current professional licensure or national certification in a health and human services profession as available and applicable.
8. Demonstrate knowledge of health, social services, and funding sources.
9. Maintain continuing education appropriate to case management and professional licensure.

## **Quality Assurance**

Quality assurance, although not a case management standard, must accompany the process of developing standards. Quality assurance data should be set up by agencies in ways that allow each access to data about compliance with standards, e.g. evaluation, up-dating service plans, types of services provided, etc. The data should ideally be computerized in a standard way across agencies.

The following reflect the Case Management Advisory Committee's concerns that there be a plan within each agency, as well as State Department of Health, for quality assurance.

### **For Agency Level Monitoring/Evaluation:**

- Policies and procedures must reflect standards
- Set case load size and composition (by acuity level) to guide case management practice
- Quality Assurance plan in place
- Consumer involvement in evaluation
- Internal supervision and chart review
- Computer data system to track number of visits, referrals, consumers, etc.

### **For Department of Health Level Monitoring/Evaluation:**

Yearly site visit to evaluate each agency  
Access to computer data, chart review, interviews with personnel  
Program review

## **Attachment E**

### **Sample Form SPO-H-205**



# **Attachment F**

## **Client Acuity Determination**

## **Client Acuity Determination**

### **PURPOSE:**

To formulate a set of guidelines to be used by HIV/AIDS case management providers in Hawaii regarding the relationship between the client and the provider group. Acuity level is one analytical method by which the relationship between client and provider group may be reviewed.

### **POLICY:**

Acuity level determinations shall be made by the individual provider agency. Acuity guidelines may be used at the discretion of the local provider agency in determining services. Acuity level will be determined at intake and reviewed as needed to meet changing client needs or whenever substantial changes occur. It is not the intention of the acuity level determination process to limit clients from access to services, but as a tool to focus attention upon services that the client deems beneficial or an integral part of the client's functioning support plan.

### **PROCEDURE:**

Case managers will endeavor to make periodic contact with clients in order to assess changing client's needs and appropriateness of a written care/service plan. Frequency and type of contact will be based upon client acuity level and expressed client need. Case managers will act as liaisons between clients and service providers to facilitate meeting client needs. Case managers will also provide supportive counseling for clients for whom services have yet to be found or implemented. The following broad acuity level criteria have been formulated to assist case managers and service providers in the process of determining a client's service needs. Specific acuity level determinations will be made at the local agency level based upon the individual client's needs and requests. It is recognized that acuity evaluations will fluctuate based upon client need, request, and services received.

#### **Level One – Highest**

HIV-positive clients with severe and acute medical, financial or psychosocial crisis who may have difficulty in successfully managing a personal care/service plan. Client will receive initial response within 24 hours when possible. When feasible, ongoing contacts should be attempted with such frequency as daily to weekly to allow intensive service coordination with other agencies/providers.

#### **Level Two – High**

HIV-positive clients with complex and acute medical, financial or psychosocial needs whose needs require emotional and/or environmental support in order to manage their own care/service plan. Contact attempts should be at least twice monthly within a significant amount of collateral contacts.



### **Level Three – Moderate**

HIV-positive symptomatic individuals with aggravating, but not acute medical, financial or, psychosocial needs who request assistance from the provider agency with case management and/or medical strategy decisions and who may benefit from moderate care assistance. Contact attempts should be less than once a month but more than once a quarter.

### **Level Four – Low**

HIV-positive individuals without acute or complex medical, financial or psychosocial needs. Clients perform independent case management with assistance and/or information from a provider agency upon client's request. No currently unaddressed medical problems. Client will need minimum contact. Quarterly contact by the agency, not necessarily from a case manager.

### **Types of contact with or on behalf of clients:**

Face-to-face, telephone, written notes and letters, electronic mail, ohana communications

# BUDGET

(Period \_\_\_\_\_ to \_\_\_\_\_)

Applicant/Provider: \_\_\_\_\_

RFP No.: \_\_\_\_\_

Contract No. (As Applicable): \_\_\_\_\_

BUDGET CATEGORIES	Budget Request (a)	Program Specific (b)	Administrative Costs (c)	(d)
A. PERSONNEL COST				
1. Salaries				
2. Payroll Taxes & Assessments				
3. Fringe Benefits				
TOTAL PERSONNEL COST				
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island				
2. Airfare, Out-of-State				
3. Audit Services				
4. Contractual Services - Administrative				
5. Contractual Services - Subcontracts				
6. Insurance				
7. Lease/Rental of Equipment				
8. Lease/Rental of Motor Vehicle				
9. Lease/Rental of Space				
10. Mileage				
11. Postage, Freight & Delivery				
12. Publication & Printing				
13. Repair & Maintenance				
14. Staff Training				
15. Substance/Per Diem				
16. Supplies				
17. Telecommunication				
18. Transportation				
19. Utilities				
20.				
21.				
22.				
23.				
TOTAL OTHER CURRENT EXPENSES				
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
TOTAL (A+B+C+D)				
SOURCES OF FUNDING		Budget Prepared By:		
(a) Budget Request		Name (Please type or print) _____ Phone _____		
(b)				
(c)		Signature of Authorized Official _____ Date _____		
(d)		Name and Title (Please type or print) _____		
TOTAL REVENUE		For State Agency Use Only		
		Signature of Reviewer _____ Date _____		